## PART B - FEE(S) TRANSMITTAL

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05/11/2007 WABDELRS		Щ	James W. P	au1		(Depositor's name)		
VE FL:1304 300		00 QP 00 QP			May 7, 2007			(Signature) (Date)
APPLICATION NO.		<del>00 0P1</del>	FIRST NAMED INVEN	TOR		ATTORNEY	DOCKET NO.	CONFIRMATION NO.
10/812,851	03/29/2004	÷	Richard N. Rigne	y _	7	BEIN	Г-65629	3440
TITLE OF INVENTION	: COOLING SYSTEM	FOR A COMMERCIAL	AIRCRAFT GALLEY	? 				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE I	OUE	PREV. PAID ISSUE	SSUE FEE TOTAL FEE(S)		DATE DUE
nonprovisional	NO	\$1400	\$300		\$0 \$170		\$1700	05/08/2007
EXAMINER ART UN		ART UNIT	CLASS-SUBCLASS	S				
JONES, MELVIN 3744		3744	062-407000					
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
PLEASE NOTE: Un recordation as set fort (A) NAME OF ASSI	less an assignee is ident th in 37 CFR 3.11. Com		data will appear on t T a substitute for filin (B) RESIDENCE: (0	the page an CITY	atent. If an assigned assignment.		ed below, the do	ocument has been filed for
Please check the appropr	riate assignee category or	categories (will not be pr	rinted on the patent):		Individual 🖾 Co	rporation or	other private gro	up entity Government
4a. The following fee(s)  ☐ Issue Fee ☐ Publication Fee (N ☐ Advance Order -	<ul> <li>D. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>☑ A check is enclosed.</li> <li>☑ Payment by credit card. Form PTO-2038 is attached.</li> <li>☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 06-2425 (enclose an extra copy of this form).</li> </ul>							
	s SMALL ENTITY state	us. See 37 CFR 1.27.	, <b>,</b>		ger claiming SMAL			(D) ( )
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) will not be accepte ites Patent and Trademar	from anyone other to office.	han t	he applicant; a regis	tered attorne	ey or agent; or th	e assignee or other party in
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Alexandria, Virginia 223		NOT SEND FEES ON	COMPLETED FORM	15 10	J THIS ADDRESS.	SEND IO.	Commissioner	by the USPTO to process) g gathering, preparing, and ne you require to complete utment of Commerce, P.O. for Patents, P.O. Box 1450,